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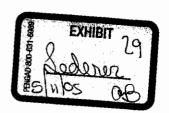
EXHIBIT C

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JOHNS HOPKINS

Center for Communication Programs

School of Hygiene and Public Health 111 Market Place - Suite 310 Baltimore, Maryland 21202 USA Telephone (410) 659-6300 / Fax (410) 659-6266 Telex 240430 JHUPCS UR



November 27, 2000

Dr. Robert Lederer P.O. Box 110521 Naples, Florida 34108

Reference: CCP Consultancy

Dear Dr. Lederer:

We are happy to confurn your short-term appointment as a consultant for The Johns Hopkins University/Cent Communication Programs (JHU/CCP).

This assignment is to provide professional services in Romania for the period from December 4, 2000 to December 2000 for a maximum of 14 working days, based on an eight-hour day, and a six-day work week, excluding travel Please note that John Snow Inc. (JSI) the Contractor does reimburse consultants for travel time.

Please review your scope of work carefully to ensure that you can complete the assignment within the specified frame(s).

Your assignment is to assist JHU/CCP and John Snow Inc. (JSI) with the Women's Reproductive Health Initiative Romania:

Specifically, you will:

1. Do a needs assessment of the current service delivery and management systems at family planning clinics in 3 juc. Meet with JSI and USAID Romania to discuss scope of work for year 2001.

Please submit a printed report of your trip to Karen Angelici at JHU/CCP. The report should adhere to the enclosed report format instructions. This report should be received two weeks after you return from this assignment, in a fe suitable for external distribution.

During your performance of these consulting services, your work will be reviewed by Karen Angelici, Acting Divis Chief, E&E Division. Walter Proper, Chief of Party, JSI will be your contact in Romania.

In accepting this assignment, it is expressly understood that:

- 1. You are not being compensated or receiving salary from other U.S. government funding sources for the till spent on JHU/CCP business.
- You have no conflict of interest that would interfere with the performance of your obligations under the assignment, and that you are not related by blood or marriage to any employee of the United States government.

or other agency who has decision-making authority over the award funding this assignment or over the proje for which you will perform consulting services. You agree to notify your JHU/CCP staff contact immediate if you know of any such changes in your circumstances.

3. You will not use any of the data or materials developed during your consultancy or in connection with the project you are assisting for public presentation or publication without prior written permission from JHU/CCP. An reports or other materials produced are considered works made for hire with ownership vesting in JHU/CCI

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Dr. Robert Lederer November 16, 2000

- You will assume all tax obligations including declaration and payment thereof.
- 5. You are not covered by The Johns Hopkins University Unemployment Insurance or any other Johns Hons insurance plans or policies.

This agreement is limited solely to the services specified and does not give you authority to make binding commit on behalf of JHU/CCP.

Your fee for services will be paid at the rate of US \$470 gross per day. This fee is payable upon completic submission of an acceptable report on the assignment. Enclosed is a "Consultant Fees Support Form," which y to complete at the end of the assignment and submit to the attention of your CCP staff contact.

For citizens or residents of the U.S., please note that all payments of fees and expenses made to you will be report income for U.S. income tax purposes; therefore, it is imperative that you maintain accurate records of your but expenses so that you can take the proper deductions when filing your tax returns. Original receipts and copies of expenses submitted to JSI for reimbursement should be maintained for your records for tax purposes.

All travel and related expenses will be handled by JSI. Copies of receipts are needed for lodgings, as well as a supenses over \$25. Please read carefully the guidelines on allowable coverage, and be sure to use the JSI are leavened Report for non-employees in reporting your expenses.

Please sign two copies as indicated at the end of this letter. One should be retained for your records and the other s be returned to me for JHU/CCP records. Also, please provide the name and phone number for the person who s be contacted in case of emergency.

If you need further information or have any problems or questions, we would be glad to provide assistance. V delighted that you are available for this consultancy and look forward to working with you.

Sincerely.

Deputy Project Director

Center for Communication Programs

ACCEPTED AND AGREED

____X0#

MUMEL VANDI VYVEL

Social Security Number

Date

l'elephone number

Citizen of [Country]

Enclosures:

Consultant Fees Support Form

Trip Report Format